



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

object which is engrossing his entire attention. If the person is sufficiently quiet to ride, take him out with the assistance of a driver upon some secluded drive where he cannot be observed and where his mind will not be attracted by familiar faces. This class of patients suffering from undue excitement of mind, especially where much confusion of conduct is observed, should, for the time being, become entirely isolated from the public. If allowed to carry out their purpose, it can but be rasping to the already excited, irritable, and intensified mental operations.

If the patient's disease is sufficiently mild and a proper amount of self-control is maintained, it is well to induce him to engage in some light employment, even if he does not accomplish much. If a farmer, some light work under the supervision of an assistant in the garden or some light farm work would be indicated; if a woman, some light employment or something of such a character as will not make too heavy a draft upon the already neurasthenic condition of the nervous system would be regarded as excellent nursing. Light reading or listening to the same may be beneficial, keeping in mind that the object is to divert the mind as much as possible from its morbid channel. It often becomes necessary that the patient's immediate family should not associate with him to any great extent, because such cases often conceive feelings of hatred towards their immediate relatives.

(To be continued.)

NEURASTHENIA

By HELEN BROWN SINCLAIR

Boston

THE name neurasthenia is modern and the condition sometimes known as American, although other countries have given to medical science valuable studies on the cause, effect, and treatment of this disease. In these days of modern nursing there are often heard among nurses expressions such as "very interesting case," "the medical ward is not nearly so interesting as the surgical ward," etc.; and there is constantly arising in the mind of the nurse the wish for interesting conditions to deal with, and she limits these conditions to the operating-room or finds them only in acute cases.

The care of neurasthenia, if not yet ranked as especially interesting, must nevertheless be conceded to demand the service of a thoroughly trained nurse,—one of whom it can be said she was "born to nurse." It

has been said that "men are not physicians by dint of study, they are born physicians." The same may be said of nurses, and when the nursing ranks are full of women who nurse for the love of helping humanity there will be found a larger number equal to the care of neurasthenia.

A nurse in private or institution work ought to be faithful in the details of duty. "To thine own self be true," thus, it will follow, false to none. Loyal and faithful to the physician, she should establish the patient's confidence in his skill by the discharge of her duties, so that between doctor and patient she becomes the medium of helpfulness.

IN THE AMERICAN JOURNAL OF NURSING recently there was mentioned in one of the articles on nursing "the bringing of the nurse to a higher conception of the spirit of nursing." This is important, and there is no path which will more surely lead to a higher conception of nursing than the care of the neurasthenic.

Consider the condition: A debilitated, irritable, despondent, and discouraged patient, suffering from complex causes and lack of nervous tone; a victim of numerous subjective symptoms, and yet unable to define them clearly, conscious of the nurse being unable to understand them because the symptoms, in many cases, are not objective; exhibiting emotional tendencies not easily controlled and a lack of ambition and interest in what at times held her interest and gave courage; easily upset by word or look on the part of the nurse; oversensitive in regard to noise; having a great desire to be alone; enduring restless nights and bad dreams, and suffering from the many distracting thoughts which come with the morning.

What is the attitude of the nurse in these conditions? A well-trained nurse in the care of neurasthenia does not consider her patient a spoiled, petted, self-willed child, full of false notions and wrong ideas, but is able to appreciate what is recognized by medical skill,—a well-defined cause for the breakdown. Hence the nurse approaches her patient with sympathy, tact, and love to help. The morning greeting is given gently and kindly, the toilet carefully attended, the tray neatly arranged, the food carefully prepared and daintily served. In many cases lunches are given every two hours, and in very weak condition of the stomach every hour or half-hour, as ordered; and the nurse dealing with these cases has ample opportunity to display her best skill in the variety and preparation of lunches that will tempt and help the most fastidious appetite and weak stomach.

Ablution, wet pack, drip-sheet, hot-blanket pack, followed with cold rub, half-tub bath, with affusions, massage, and exercises, may be ordered, and the patient's condition during and after these treatments must be carefully watched by the nurse. The bed must be well made, the pillows

well smoothed, plenty of fresh air admitted, and the room made clean and neat. Temperature and light should be made agreeable to the patient unless otherwise ordered. Then comes the call for individual resources from the nurse, the doing and thinking for the patient, infusing courage and confidence, so that the long-established habit of comparing and fearing various symptoms may become less and an interest in present surroundings established. Then the regular and prescribed rest and occupation are attended to, and the day passes quickly amid the varied duties. In the evening treatment is often given to induce sleep, as warm tub bath, sponge bath, alcohol rub, hot foot bath, whole or half wet pack, Neptune girdle, gentle stroking, or light massage. All rays of flickering light are then shut out, noise so far as possible is suppressed, and a hot lunch and a soothing word prove excellent measures for inducing a good night's rest.

Surely these conditions and their treatment demand the highest type of nursing skill, engage one's genuine interest, and develop the best and highest in one's character.

THE NURSES' QUARTERS IN MANILA

By AUGUSTA G. REED

Graduate of the Methodist Episcopal Training-School, Brooklyn

THE building, one of the handsomest in Manila, was formerly the home of the Spanish admiral whose fleet was destroyed by Dewey. It is a palatial structure in Spanish and Moorish architecture one hundred feet square, set in a garden of palms, mango- and banana-trees, and blooming flowers, right in the heart of the residential portion of the city. A general memory recalls marble stairways, colonnades, hall floors of mosaic, and marble chairs with frames of hardwood inlaid with mother-of-pearl.

The Palacio is situated on the north shore of the Pasig River. The grounds slope down in the rear to the river-bank, where by way of a gate one enters upon a little private stone dock with steps leading down to the water's edge. Here lie many private boats at anchor, and a sail on the Pasig at sunset or on a moonlight night is something to remember.

Unlike most of the houses in Manila, this one has both an outer and an inner court. The inner court has a playing fountain which sprays the many potted plants arranged on the stone steps. These steps lead up to the basin, or pool.

The doors and windows are peculiarly made. The former are large,